

LOYALTY OATH CANDIDATES WITH NO PARTY AFFILIATION <small>(Sections 876.05-876.10, Florida Statutes)</small> STATE OF FLORIDA _____, COUNTY		OFFICE USE ONLY	
I,			
	First Name	Middle Name/Initial	Last Name
a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.			
OATH OF CANDIDATE <small>(Section 99.021, Florida Statutes)</small>			
I, _____ <small>(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT --- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)</small>			
am a candidate for the office of _____ , _____ , _____ , <div style="display: flex; justify-content: space-around; font-size: small;">(office)(district)(circuit)</div> _____ . I am a qualified elector of _____ County, Florida. I am qualified <div style="display: flex; justify-content: space-around; font-size: small;">(group)</div>			
under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected. I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes.			
X ()			
Signature of Candidate		Daytime Telephone Number	
Address	City	State	ZIP Code
Sworn to (or affirmed) and subscribed before me this _____ day of _____, 200_____.			
Personally Known: _____ or			
Produced Identification: _____			
Type of Identification Produced: _____		<div style="border-top: 1px solid black; margin-bottom: 5px;">Signature of Notary Public – State of Florida</div> Print, Type or Stamp Commissioned Name of Notary Public	
DS-DE 24B (Rev. 05/07)			